

Work Order ID 68604

Monday, April 18, 2011 12:48:15 PM



Page 1

Item ID: D412-711-101

Accept



Setup Start



Revision ID:

Stop



Item Name: Replacement Bubble Window

Start Date: 4/18/2011 Start Qty: 3.00

Required Date: 4/25/2011 Req'd Qty: 3.00



Cust Item ID:

Customer:

Reference:

Approvals:

Process Plan:

Date: 4-18-11

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

Draw Nbr

Revision Nbr

D412-711-101

A

100

0.00



DC

Memo

0.00

Document Control

Photocopy bluefiles and create labels
for PPP D412-711-101 Change 002

8/15/04

110

0.00



HandThermo

HAND FINISHING THERMOFORMING

Memo

0.00

Hand Finishing Thermoforming

Set up Machine as per folio FTA 077 and D711W program using mould DT9640

Dh
11/04/29

120

0.00



HandThermo

HAND FINISHING THERMOFORMING

Memo

0.00

Hand Finishing Thermoforming

Cut Blanks to 36" by 39"

Dh
11/04/29

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

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Page 2

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Item Name: Replacement Bubble Window

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Start Date: 4/18/2011 Start Qty: 3.00



Cust Item ID:

Required Date: 4/25/2011 Req'd Qty: 3.00



Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start



Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 Thermoform Thermoforming Machine	THERMOFORMING MACHINE Memo Thermoform as per Dwg. D412-711-101 using DT 9640 and Folio FTA 077 <u>A.</u> Dwg. Rev. <u>A</u> Folio Rev.	0.00 0.00				<u>x3</u>			<u>DL</u> <u>11/04/28</u>
140 QC Quality Control	QC2- Inspect parts off machine FAI/FAIB Memo 1) Check Surface finish for undesired marks, voids, dimples etc. □ 2) Check depth of bubble to ensure conformity to drawing tolerances.	0.00 0.00				<u>x3</u>	<u>x1</u>		<u>DL</u> <u>11/04/28</u> <u>PTO</u> →
150 QC Quality Control	QC8- Inspect parts - second check Memo	0.00 0.00				<u>x3</u>	<u>x1</u>		<u>B</u> <u>11/04/29</u>

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: D 412-711-101 PAR #: _____ Fault Category: Thermofarming NCR: Yes No DQA: OK Date: 11.05.11
 Resolution: Scrap Disposition: Scrap QA: N/C Closed: OK Date: 11/05/12

11-582

NCR: 68604

		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			
<u>11/04/29</u>	<u>140</u>	<u>Rip in sheet while farming.</u> <u>LL Process</u>	<u>AB</u> <u>04/29/12</u>	<u>Slow down Vacuum Rate.</u> <u>Scrap & Replace 1 part</u>	<u>Wh.</u> <u>11/04/29</u>	<u>OK</u> <u>11/05/12</u>	<u>AB</u> <u>04/29/12</u>	<u>AB</u> <u>11/05/12</u>

NOTE: Date & initial all entries

Work Order ID 68604

Monday, April 18, 2011 12:48:15 PM



Page 3

Item ID: D412-711-101

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Setup Start



Revision ID:

Stop



Item Name: Replacement Bubble Window

Start Date: 4/18/2011 Start Qty: 3.00



Cust Item ID:

Required Date: 4/25/2011 Req'd Qty: 3.00



Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 HandThermo	HAND FINISHING THERMOFORMING	0.00				<u>x2</u>			<i>Dh</i>
Hand Finishing Thermoforming	Memo 1) Trim off excess flange material 2) Buff out any light scratches or 3) Etch part number and batch number	0.00							<i>11/05/02</i>
170 QC	QC2- Inspect parts off machine FAI/FAIB	0.00				<u>x2</u>	<u>x1</u>		<i>Dh</i>
Quality Control	Memo 1) Visually inspect for clarity, and proper formation.	0.00							<i>11/05/02</i> <i>PTO</i>
180 QC	QC5- Inspect part completeness to step on W/O	0.00				<u>x2</u>			<i>Dh</i>
Quality Control	Memo 1) Visually inspect for clarity, and proper formation.	0.00							<i>11/05/02</i> <i>PTO</i>

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: D412-711-101 PAR #: N/A Fault Category: Thermoforming NCR: Yes No DQA: N/A Date: 11.05.13
 Resolution: Scrap Disposition: Scrap QA: N/C Closed: C Date: 11/05/13

NCR: <u>68604</u>		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			
<u>11/05/02</u>	<u>170</u>	<u>Window too thin</u> <u>R.C. Press</u>	<u>[Signature]</u> <u>04/02/12</u>	<u>Scrap 1 window</u> <u>Vacuum too slow.</u>	<u>[Signature]</u> <u>11/05/02</u>	<u>[Signature]</u> <u>11/05/03</u>	<u>[Signature]</u> <u>04/02/12</u>	<u>[Signature]</u> <u>11-05-03</u>

NOTE: Date & initial all entries

Work Order ID 68604

Monday, April 18, 2011 12:48:16 PM



Page 4

Item ID: D412-711-101

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Setup Start



Revision ID:

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Item Name: Replacement Bubble Window

Start Date: 4/18/2011 Start Qty: 3.00



Cust Item ID:

Required Date: 4/25/2011 Req'd Qty: 3.00



Customer:

Reference:

Run Start



Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Stop



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
185 QC Quality Control	QC4- 100% Inspect kits for completeness Memo	0.00 0.00							
190 Packaging Packaging	Identify as per dwg & Stock Location: _____ Memo	0.00 0.00							
200 QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00							

9/17-05-4

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

Monday, April 18, 2011 12:48:22 PM

Page 1

Work Order ID: 68604



Parent Item: D412-711-101



Parent Item Name: Replacement Bubble Window

Start Date: 4/18/2011

Required Date: 4/25/2011

Start Qty: 3.00

Required Qty: 3.00

Comments: IPP Rev:A New Issue 06-02-01 JLM
Manufacture in-house 10/06/28 DL

IPP Rev. B.

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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MACRLICS.236

Purchased

No

sf

37.3333

64



Plexiglass G .236"

Location

Loc Qty

Loc Code

therm

37.33333

116030

37.33333

M 117563

64 sq ft.

DL
11/05/04

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

DART AEROSPACE LTD		Work Order:	<i>Q7604</i>
Description: Replacement Window		Part Number:	D412-711-101
Inspection Dwg: D412-711-101 Rev: A		Page 1 of 1	

FIRST ARTICLE INSPECTION CHECKLIST
THERMOFORMING SECTION

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than <i>N/A</i>	<input checked="" type="checkbox"/>			
Shape Definition	<input checked="" type="checkbox"/>			
Texture Retention	<input checked="" type="checkbox"/>			
Material imperfections such as bumps, cracks, voids, scratching	<input checked="" type="checkbox"/>			

Measured by:	<i>Sh</i>	Date:	<i>11/04/02</i>
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TRIMMING SECTION

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
2.00	+/-0.030	<i>2.02"</i>	<input checked="" type="checkbox"/>		<i>ULTRA DL-02</i>	
1.73	+/-0.030	<i>1.753"</i>	<input checked="" type="checkbox"/>		<i>ULTRA DL-02</i>	
1.98	+/-0.030	<i>1.99"</i>	<input checked="" type="checkbox"/>		<i>ULTRA DL-02</i>	
1.50	Min	<i>1.64"</i>	<input checked="" type="checkbox"/>		<i>ULTRA DL-02</i>	
0.090	Min	<i>0.092"</i>	<input checked="" type="checkbox"/>		<i>ULTRA</i>	
0.070	Min	<i>0.089"</i>	<input checked="" type="checkbox"/>		<i>ULTRA</i>	
0.050	Min	<i>0.079"</i>	<input checked="" type="checkbox"/>		<i>ULTRA</i>	
15.0	+/-0.5	<i>15.375"</i>	<input checked="" type="checkbox"/>		<i>TAPE DL-01</i>	

Measured by:	<i>Sh</i>	Date:	<i>11/05/02</i>
Audited by:	<i>S</i>	Date:	<i>11/15/03</i>
Preliminary Approval:		Date:	

Rev	Date	Change	Revised by	Approved
B	10.10.08	New Issue	<i>KJ</i>	<i>[Signature]</i>

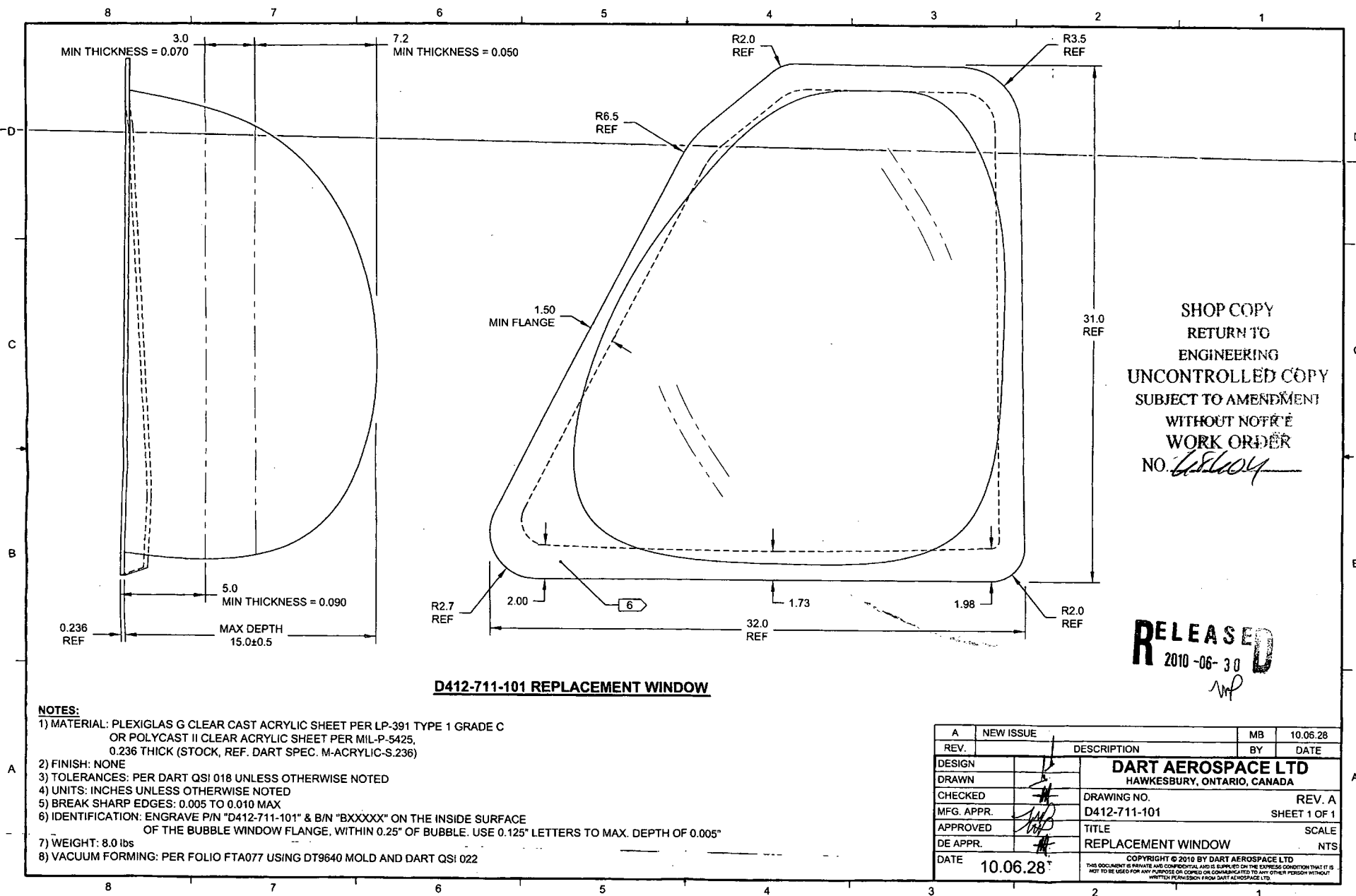
W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries



W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

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			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

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